

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # P96000065825

1. Entity Name

WAKKANAI REALTY, INC.

02 OCT 22 AM 9:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
95 MERRICK WAY

3. Mailing Address  
SAME

Suite, Apt. #, etc.  
SUITE 440

Suite, Apt. #, etc.  
SAME

City & State  
CORAL GABLES, FL

City & State  
SAME

Zip  
33134

Country  
USA

Zip  
SAME

Country

4. FEI Number  
65-0742925

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name  
LUIS FIGUEROA

Street Address (P.O. Box Number is Not Acceptable)

815 PONCE DE LEON BLVD, 2ND FLOOR

City  
CORAL GABLES

FL

Zip Code  
33134

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

*[Signature]*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9/24/02

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**11. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
WALKYRIA BATISTA  
815 PONCE DE LEON BLVD, 2ND FLOOR  
CORAL GABLES, FL 33134

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
LUIS FIGUEROA  
815 PONCE DE LEON BLVD, 2ND FLOOR  
CORAL GABLES, FL 33134

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*[Signature]* Director 9/24/02

CR2E034B (12/01)

75 10/24/02

DE LA CRUZ & CUTLER  
LAW OFFICES

ALHAMBRA WEST  
95 MERRICK WAY, STE. 440  
CORAL GABLES, FL 33134

TELEPHONE (305) 446-0100  
FACSIMILE (305) 445-5500

September 21, 2002

Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

RE: Document # P96000065825, Wakkanai Realty, Inc.

Dear Sirs:

Please be advised that we did not receive any correspondence in reference to the above transaction stating that it had not been filed due to the missing new registered agent's signature. I have reprinted a new annual report form and it has been fully executed. You have in your possession the check and the old form.

Should you have any questions, please contact the undersigned immediately. Your prompt attention to this matter will be greatly appreciated.

Sincerely

De La Cruz & Cutler, P.A.

By: 

Rita Gomez, Legal Assistant

I sent this on the  
21st of Sept. and it  
was returned to  
our office but I don't  
know why. Please let  
me know if there's  
something else you  
may need.

10/21/02

Thanks,  
Rita